

HEPATITIS C IN CANADA: **PRIMARY CARE PHYSICIANS ARE THE IST POINT OF SCREENING**

WHY SCREEN FOR HEPATITIS C?



Hepatitis C is a liver disease which can progress to cirrhosis, liver cancer and ultimately death from liver failure.

New effective treatments are available!

Screen for early detection and intervention.

250,000 - 400,000 CANADIANS HAVE HEPATITIS C'



RECOGNIZE • Who to screen

RISK-BASED SCREENING ALONE IS INEFFECTIVE

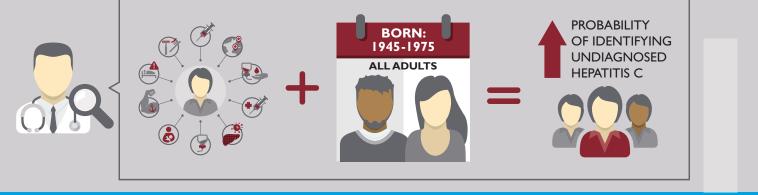


RISK-BASED SCREENING:

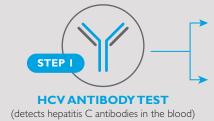
A) Illicit injection or intranasal drug use or shared drug paraphernalia (past or present)

- B) Born or resident in a region where hepatitis C is more common (i.e.: Central, East and South Asia; Australasia and Oceania; Eastern Europe; Sub-Saharan Africa; and North Africa/Middle East)
- C) Blood, blood products or an organ transplant before July 1990 in Canada
- D) Needle stick involving hepatitis C positive blood
- E) Signs of liver disease (i.e.: abnormal liver enzyme tests) or other infectious diseases (i.e.: hepatitis B, HIV, etc.)
- F) Kidney/hemodialysis treatment
- G) Children born to hepatitis C positive mothers
- H) Tattoos or body piercings
- I) Risky sexual activity (i.e.: multiple partners, traumatic or rough sex, etc.)
- J) Shared personal care items with someone who has hepatitis C (i.e.: razors, toothbrush, etc.)

THE CANADIAN LIVER FOUNDATION RECOMMENDS **ADDING BIRTH-COHORT SCREENING**³

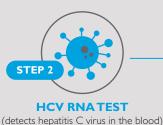






 hepatitis C infection
No hepatitis C antibody detected

Presumptive



Hepatitis C infection

> No hepatitis C infection

RESOLVE • What to do after testing

REFERRAL FOR CARE AND TREATMENT

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www.liver.ca/HepC4HCP

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Refer to your preferred specialist or search for a specialist in your area at <u>www.liver.ca/liverdocs</u>

Follow-up with additional testing according to test results noted above. Screen for mental health/substance use disorders, and if present, treat or refer as appropriate.

EVALUATION/MONITORING

Ongoing mental health or substance use disorders should not exclude patients from being immediately referred for treatment.



I. Trubnikov, M., P.Yan, and C. Archibald. Estimated prevalence of Hepatitis C virus infection in Canada, 2011. Canada Communicable Disease Report 40.19 (2014):429
Remis RS. Modelling the incidence and prevalence of hepatitis C infection and its sequelae in Canada, 2007. Ottawa (ON): Public Health Agency of Canada; 2007
<u>http://liver.ca/support-liver.foundation/advocate/clf-position-statements/hepatitis C itstingaspx</u>